U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E400 2 2 2003	
1. File Number U - 11993	2. Fiscal Year Covered From:
Committee Commit	01/01/2004 Through: 12/31/2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Kris L Shangle	Name Local 85 Pension - Insurance
,	Labor Organization File Number 1040102
P.O. Box, Bldg., Room No., if any POBox 6547	P.O. Box, Building and Room Number, if any POBOX 6547
Street 6705 Weiss St.	Street 6705 Weiss St.
city Saginaw	City Saginaw
State Michigan ZIP Code + 4 48608	State Michigan ZIP Code +4 48608
5. Position in labor organization. Business Manager	/Financial Secretary / Trustee
(except as specified in the ex-	pouse or minor child directly or indirectly had any of the following interests clusions set forth in the instructions): or derived income or other economic benefit of
(except as specified in the ex- A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organiza	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent.
(except as specified in the ex-	clusions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organizate. Name and address of Employer (including trade name, if any).	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent.
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organized. 6. Name and address of Employer (including trade name, if any).	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent.
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organized. Name and address of Employer (including trade name, if any). Name	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent.
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organized. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
(except as specified in the except as specified in the except as interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organizes 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organizes. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
(except as specified in the except as specified in the except as interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organizes of the except as a constant of the except as specified in the except as specified in the except as specified in the except as a constant of the ex	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.
(except as specified in the except as specified in the except as interest in, engaged in transactions (including loans) with, comonetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. ignature of Perjury and other applicable penalties of the law, that all of the information anying documents), has been examined by the signatory and is, to the best of the
A. Held an interest in, engaged in transactions (including loans) with, of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Si 15. Signature and verification. The undersigned declares, under penalty submitted in this report (including the information contained in any accomp-	clusions set forth in the instructions): or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. ignature of Perjury and other applicable penalties of the law, that all of the information anying documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Kris Shangle	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (Including trade name, if any). Name Local Union 85 Trade Name, if any: Plumbers & Steam Citters P.O. Box, Bldg., Room No., if any PO Box 6547 Street 6705 Weiss St. City Saginaw State Michigan ZIP Code +4 48608	9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name Local 85 Pension - Insurance Trade Name, if any: Plumbers - Steamfitters P.O. Box, Bldg., Room No., if any PO Box 6547 Street 6705 Weiss St. City Saginaw State Michigan ZIP Code + 4 48608	International Foundation 50th Annual Conference 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Airfare to Conference in New Orleans			
	12.b. Amount. 2.86.90			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:	The second secon			
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			